


FILE NOW: FILING FEE AFTER MAY 1ST IS: \$550.00

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Apr 26, 1999 8:00 am
Secretary of State

04-26-1999 90156 015 ***150.00

PROFIT CORPORATION ANNUAL REPORT 1999		 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # P97000027169			
1. Corporation Name PRICE QUALITY ENTERPRISES, INC.			
Principal Place of Business 2011 NE 163 RD STREET NORTH MIAMI BEACH FL 33162		Mailing Address 2011 NE 163 RD STREET NORTH MIAMI BEACH FL 33162	
2. Principal Place of Business		2a. Mailing Address	
21. Suite, Apt. #, etc.		26. Suite, Apt. #, etc.	
22. City & State		27. City & State	
23. Zip		28. Zip	
24. Country		29. Country	
25. Country		30. Country	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	
MOGELL, EARL 2011 NE 163 RD STREET NORTH MIAMI BEACH FL 33162		81. Name 82. Street Address (P.O. Box Number is Not Acceptable) 83. 84. City 85. Zip Code	
86. State		87. Zip Code	
11. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.			
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE			
12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-STATE-ZIP		1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-STATE-ZIP	
D MOGELL, EARL 2011 NE 163 RD STREET NORTH MIAMI BEACH FL 33162		2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-STATE-ZIP	
ST MOGELL, FREDERICK 9372 S CHELSEA DR S PLANTATION FL 33324		3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-STATE-ZIP	
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-STATE-ZIP		5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-STATE-ZIP	
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-STATE-ZIP		7.1 TITLE 7.2 NAME 7.3 STREET ADDRESS 7.4 CITY-STATE-ZIP	
8.1 TITLE 8.2 NAME 8.3 STREET ADDRESS 8.4 CITY-STATE-ZIP		9.1 TITLE 9.2 NAME 9.3 STREET ADDRESS 9.4 CITY-STATE-ZIP	



DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/20/1997

4. FEI Number

65-0739847

Applied For

Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation owes the current year Intangible Personal Property Tax.

Yes No

CR2E034 (11/98)

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Earl Mogell EARL MOGELL

4/22/99 (305) 940-8682

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #